## BIRCH, STEWART, KOLASCH & BIRCH, LLP

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

ATTORNEY DOCKET NO. 0965-0415P

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FOLLOWING:

## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor. I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	■ INTAGLIO PRIN	TING PRESS	and for which a patent is sot	ight on the invention entitled:
	the specification of which is attached h	ereto. If not attached hereto.		
Fill in Appropria Information - For Use	te the specification was filed o	n		as
Without Specification Attached:	and amended on the specification was filed o		( if a	pplicable): and/or
Attached:	International Application N			as PCT
	amended on			; and was
				(if applicable)
	I acknowledge the duty to disclose \$1.56.  I do not know and do not believe thereof, or patented or described in an prior to this application, that the same application, that the invention has not application in any country foreign to the more than twelve months (six months on this invention has been filed in any representatives or assigns, except as for the property that the same according to the same application.	e information which is material the same was ever known of the publication in any was not in public use or on some been patented or made the le United States of America for designs) prior to this apply country foreign to the United States of the United States of America for designs) prior to this apply country foreign to the United States of America for designs) prior to this apply country foreign to the United States of America for designs of the United States of th	of the above identified specification, included to patentability as defined in Title 37, or used in the United States of America country before my or our invention the ale in the United States of America more subject of an inventor's certificate isson an application filed by me or my legalization, and that no application for patted States of America prior to this applicates Code, §119 (a)-(d) of any foreign application for any foreign application	code of Federal Regulations, before my or our invention ereof or more than one year e than one year prior to this ued before the date of this al representatives or assigns tent or inventor's certificate lication by me or my legal
	or inventor's certificate listed below an a filing date before that of the applicate Prior Foreign Application(s)	d have also identified below ion on which priority is clai	any foreign application for patent or in med:	nventor's certificate having
Insert Priority Information:	<ul><li><u>20</u>02-288506</li></ul>		•	Priority Claimed
(if appropriate)	(Number)	Japan (Country)	October 1, 2002 (Month / Day / Year Filed)	Yes No
	(Number)	(Country)	(Month / Day / Year Filed)	Yes No
	(Number)	(Country)	(Month / Day / Year Filed)	Yes No
	(Number)	(Country)	(Month / Day / Year Filed)	
Insert Provisional Application(s): (if any)	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.			
	(Application Number)			(Filing Date)
	(Application Number)			(Filing Date)
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed more than 12 months (6 months for designs) Prior to the Filing Date of this Application:			
Insert Requested Information: (if appropriate)	Country	App	Application Number Date of Filing (Month / Day / Year)	
Insert Prior U.S. Application(s):	I hereby claim the benefit under Title 35, insofar as the subject matter of each of the in the manner provided by the first parage which is material to patentability as defifling date of the prior application and the	raph of Title 35, United Sta	tes Code, §112, I acknowledge the duty	s and/or PCT application
(if any)	(Application Number)	(Filing Date)	(Status - patented, pe	nding, abandoned)
Page 1 of 2	(Application Number)	(Filing Date)		
		( Date)	(Status - patented, per	nding, abandoned)

I hereby appoint the practitioners at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

PLEASE NOTE:

BIRCH, STEWART, KOLASCH & BIRCH, LLP or **CUSTOMER NO. 2292** P.O. Box 747 • Falls Church, Virginia 22040-0747

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

YOU MUST COMPLETE THE FOLLOWING: Full Name of First or Sole Inventor: GIVEN NAME FAMILY NAME INVENTOR'S SIGNATURE Insert Name of Inventor DATE\* sert Date This Untaba Endo Yutaka **ENDO** Document is Signed Sept.2, 2003 Residence (City, State & Country) Insert Residence CITIZENSHIP Noda-shi, Chiba, Japan Insert Citizenship Japan MAILING ADDRESS (Complete Street Address including City, State & Country) Insert Mailing c/o KOMORI CORPORATION, Sekiyado Plant Address <u>Kiriqasaku, Noda-shi</u> Ch<u>iba,</u> Japan Full Name of Second GIVEN NAME FAMILY NAME Inventor, if any: INVENTOR'S SIGNATURE DATE\* Residence (City, State & Country) CITIZENSHIP MAILING ADDRESS (Complete Street Address including City, State & Country) Full Name of Third GIVEN NAME FAMILY NAME INVENTOR'S SIGNATURE Inventor, if any DATE: see above Residence (City, State & Country) CITIZENSHIP MAILING ADDRESS (Complete Street Address including City, State & Country) Full Name of Fourth GIVEN NAME FAMILY NAME Inventor, if any INVENTOR'S SIGNATURE DATE! see above Residence (City, State & Country) CITIZENSHIP MAILING ADDRESS (Complete Street Address including City, State & Country) Full Name of Fifth GIVEN NAME FAMILY NAME INVENTOR'S SIGNATURE Inventor, if any DATE: Residence (City, State & Country) CITIZENSHIP MAILING ADDRESS (Complete Street Address including City, State & Country) Page 2 of 2 (Revised 01/02) DATE OF SIGNATURE